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EDITOR'S MISCELLANY



(Extract from a paper by Rev. Josiah Strong, published in *Social Diseases* for October, 1911.)

"I COME now to the phase of the general subject on which I was requested to write—different standards of chastity for men and women. Barbarous and civilized peoples alike, Buddhist, Christian, and Moslem peoples alike, have insisted strongly on chastity in women; but no one of them has ever seemed to expect a like chastity in ordinary men. A few particularly holy men have been expected to be chaste, and the priests of some religions have been celibates and supposedly holier for that reason—a very disastrous implication; but the mass of men have not pretended to maintain for themselves the same standard in this respect which they have forced upon their women. Kings, princes, and rulers have not been expected to be continent. Good society, so-called, took no offence at young men who were dissolute before marriage; and even women spoke lightly of such conduct in youth. To yield to the sexual passion was supposed by young men to be an evidence of virility and boldness. It was commonly believed that incontinence for men was healthier than continence, particularly if marriage was long postponed; and the carrying over into the married state of the characteristic diseases of profligacy was ill understood. Young men left by their parents and schools ignorant concerning the natural processes of reproduction, and filled by ignorant and coarse companions with false notions on the subject, fell into evil ways without deliberation, in a spirit of adventure, or almost accidentally while under the influence of alcohol.

"The advance of preventive medicine, and the far better understanding of the conditions of health and bodily vigor which obtains to-day, have put the whole subject of masculine chastity in a new light. It is now absolutely known that complete continence is consistent with perfect health (and indeed, that continence is necessary to the highest development of bodily strength and endurance). It is clearly understood that the consequences to offspring of lack of chastity in the father may be just as grave as those of lack of chastity in the mother; and

that the happiness and security of family life are quite as apt to be destroyed by want of purity and honor in the father as in the mother. Thus the lack of children, or the limitation of children to one or two in the family, is not infrequently the direct result of immorality in the male.

"There is therefore no physical reason, and there never has been any moral reason, for maintaining two standards as regards chastity, one for men and the other for women. The same virtue is needed in both sexes for the happy development of that family life on which the security of the race and the progress of civilization depend. All down the centuries modesty, chastity, and fidelity in women have been desired and honored, because these virtues were held to contribute powerfully to the welfare of the family and the race. In the light of modern science, it is plainly to be seen that these virtues in men would have the same uplifting and consecrating effect on the family and the race. The double standard of chastity for men and women ought not to survive the increase of biological knowledge, the improvement of ethical doctrines, and the developed sense of social obligation."

THE CONVERSATION OF NURSES

(Extract from an address delivered by Elisabeth Robinson Scovil to the graduating class of St. John Hospital, New Brunswick.)

No doubt you have all been cautioned not to speak of hospital cases in your private practice. Of course gruesome details of operations and tales of agonizing suffering are not cheerful hearing for anyone, nor a suitable topic of conversation for a convalescent. But these are not the staple of hospital life, and there are many things that may very properly be told and may help to bring the fortunate private patient into sympathy with her fellow sufferers in the wards.

Even the true history of an operation may be of use and serve to dispel many frightful delusions. Surgeons' knives to the lay mind mean carving knives, at least, and rivers of blood are popularly supposed to flow whenever the skin is cut. If you can describe how careful is the preparation, how little the exposure, how skilfully wielded the tiny thin blade that only wounds to heal, how profound the unconsciousness that shields the patient, you may have done a good work. At some future time when an operation may be necessary, either for your patient or one of her dear ones, it will be met with more cheerful courage because one who knows has told her the truth about it.